

## CONTRACT ADMINISTRATION FORMS

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- DISTRIBUTION**  
 1. Lincoln Construction Office  
 2. District Engineer  
 3. Project Manager  
 4. Contractor  
 5. FHWA  
 6. City or County

## CONTRACT TIME ALLOWANCE EXTENSION DOCUMENT

<b>CONTRACTOR:</b> Cyclone Construction Co.	<b>DATE:</b> 7-24-96
<b>CONTRACTOR NO.:</b> 1948	<b>PROJECT NO.:</b> PEP-30-6(1031)
<b>GROUPS OF WORK:</b> 7B	<b>LOCATION:</b> Columbus-Schuyler
<b>DOCUMENT NO.:</b> #2 (i.e., 2nd extension processed)	<b>CONTRACT NO.:</b> 1143

**THE CONTRACT TIME ALLOWANCE IS BEING EXTENDED AS DETAILED BELOW, FOR THE FOLLOWING REASON(S):** *(Continue on reverse side if more space is needed).*

Columbus City engineer requested that work be shut down until intersection being constructed by the City at Station 100.15 is complete.

(Use of this is encouraged.)

(Not necessary if days are added by a change order.)

(Do not ignore charging a working day in lieu of filling out this form for a valid "extra" requirement.)

(This form helps the Finals Section track days and allows accurate retention of payments.)

TIME ALLOWANCE TYPE	ORIGINAL * DAYS ALLOWED	PREVIOUSLY EXTENDED NUMBER OF DAYS	EXTENDED UNDER THIS DOCUMENT	ADJUSTED TOTAL
OVERALL CONTRACT	115	12	20	147
HEAD TO HEAD	55	0	5	60
DETOUR	60	0	6	66
EARTH SHOULDERING	5	0	1	6

\* WD (Working Days)

\* CD (Calendar Days)

FOR THE DEPARTMENT OF ROADS	FOR THE FEDERAL HIGHWAY ADMINISTRATION
APPROVED: <i>(Project Manager)</i>  APPROVED: <i>(District Engineer)</i>  APPROVED: <i>(Construction Engineer)</i>	APPROVED:

DR Form 16, Jun 87

# FIELD APPROVAL OF SUBCONTRACT WORK

(Maximum Amount \$10,000)

White - Lincoln Construction Office  
Canary - District Office  
Pink - Contractor  
Goldenrod - Project Manager

PRIME CONTRACTOR: (Name) Cyclone Construction Co.		PROJECT NUMBER: F-6-7(1030)
NUMBER: 1948		LOCATION: 152nd Street - 162nd St., Omaha
SUBCONTRACTOR: (Name) Windy Construction Co.		CONTRACT DATE: 4-27-96
NUMBER: 2021 <input type="checkbox"/> NONE		CONTRACT NUMBER: 1143
ADDRESS: 12905 South 70th, Papillion, NE 68133		CONTRACT AMOUNT: \$ 561,100.75

## Subcontractor is qualified by one of the following:

- ☒ Prime Contractor on a current State of Nebraska project.
- ☐ Approved Subcontractor on a State of Nebraska project.
- ☐ Addition to subcontract on subject project.
- ☐ Checked with Lincoln Construction Office.

## Subcontractor's insurance is current:

- ☒ Checked on computer.
- ☐ Checked with Lincoln Construction Office.

CONTRACT GROUP NO. / Line No.	DESCRIPTION OF WORK (Item etc.)	QUANTITY	UNIT MEAS.	CONTRACT UNIT PRICE	CONTRACT VALUE
7B	1,000 m of 2 m high chain-link fence	100	m	\$5.00	\$5,000.00
4	500 mm culvert 80 m in length	80	m	6.50	520.00
	(include line number to help locate specific item)				

REMARKS:	Total Amount of Subcontract	\$5520.00
	% of Contract Amount Subcontracted	1
	% Previously Subcontracted	10
	<b>TOTAL % Subcontracted</b>	<b>* 11</b>

\* Cannot exceed the % permitted under the contract.

As representative of the prime contractor, I am hereby requesting permission to subcontract the above described work.

(Contractor)

(Signature)

Permission to subcontract the above described work is hereby granted as of \_\_\_\_\_ on \_\_\_\_\_

(Time)

\_\_\_\_\_ A formal written approval will be forwarded to the contractor by the Lincoln Construction Office.

(Date)

(Project Manager)

This method of approving subcontract work is to be used only in case of emergency, when time does not permit direct approval from the Lincoln Construction Office. PLEASE TRANSMIT TO LINCOLN CONSTRUCTION OFFICE NO LATER THAN NEXT WORKING DAY.

STATE OF NEBRASKA  
DEPARTMENT OF ROADS

THIS FORM REPLACES DR FORM 44A, FEB 71,  
PREVIOUS EDITIONS OF THIS FORM WILL NOT BE USED.

STATE OF NEBRASKA  
DEPARTMENT OF ROADS  
**FORCE ACCOUNT AGREEMENT**

- ORIGINAL AND FIVE (5) COPIES MUST BE SUBMITTED TO THE LINCOLN OFFICE -

CONTRACTOR: Cyclone Construction Co.	DATE: (Date form prepared)
LOCATION: City/Highway	PROJECT NUMBER: (As shown on contract)
FOR WORK ON PROJECT NUMBER: (Complete Project Number)	CONTROL NUMBER: (As shown on contract)
	STATION:
	DATE OF ORIGINAL CONTRACT:

PERFORMANCE OF WORK NOT INCLUDED IN THE ORIGINAL CONTRACT PROVISIONS SHALL BE PAID AT THE RATES INCLUDED IN THIS AGREEMENT. THE EXTRA WORK TO BE PERFORMED UNDER THIS AGREEMENT SHALL BE THE FOLLOWING:

Explain why work is being done, what is to be done by the Contractor, and if applicable, what the Department will do.

(Only use for a real "Force Account" situation.)

(Rarely used.)

(Used in conjunction with DR Form 204)

**THE FOLLOWING RATES SHALL APPLY**

SUPERVISORY LABOR			OTHER LABOR			
TITLE	RATE		CLASSIFICATION	HOURLY (Min.)	** BASIC RATE (Max.)	BENEFITS (per hour)
(Foreman)	per		(Enter Std. Labor Classifications)			
(Do not use Superintendent)	per					
	per					
	per					
Social Security, Workman's Compensation and Public Liability _____ %						
Profit on Labor, Insurance, Taxes, Health and Welfare, Pension, _____ %						
Training and Vacation (Provided by Contractor) _____ %						

\*\* DOES NOT REFLECT APPLICABLE OVERTIME →

EQUIPMENT (Type)	SIZE	HOURLY RATE	*	MATERIAL (Type)	ESTIMATED COST
List all required equipment and the negotiated rate.				(Enter entire Material Estimate)	\$

\* STATUS: FO - Fully Operated; WO - Without Operator; R - Rented

**TOTAL ESTIMATED COST OF THIS AGREEMENT** (See reverse side for computations) \$

CONTRACTOR'S AUTHORIZED AGENT:	DATE:	<b>DEPARTMENT OF ROADS APPROVAL</b>	
		DISTRICT ENGINEER:	DATE:
AUTHORIZED AGENT FOR CITY-COUNTY:	DATE:	CONSTRUCTION ENGINEER:	DATE:

# @ Cost Overrun/Underrun Notification

*This form is to be prepared by the Project Manager and submitted to the Controller Division in accordance with the instructions printed in the Construction Manual.*

Date: 1-5-2001					
<input checked="" type="checkbox"/> Overrun <input type="checkbox"/> Underrun					
Project No.: F-2-7(106)		Location: Nebraska City East		Control No.: 12345	
Contractor: ABC Construction		Contractor No.: 9876	Letting Date: 10/21/99	Contract No.: 1345X	
Group	Item of Work	Quantity	Units	Unit Price	Amount
1	Excavation of Unsuitable Material	25,000.00	Cu Yds	\$3.17	\$79,250.00
4	Granular Material for Bedding	26.00	Tons	\$40.00	\$1,040.00
3	8" Concrete Paving	-1,395.00	Sq Yds	\$21.16	(\$29,518.20)
3	9" Concrete Paving	1,395.00	Sq Yds	\$23.59	\$32,908.05
				\$	\$0.00
				\$	\$0.00
				\$	\$0.00
				\$	\$0.00
				\$	\$0.00
				\$	\$0.00
				\$	\$0.00
				\$	\$0.00
				\$	\$0.00
Net Change this Report ➔					\$83,679.85

Brief explanation of reason for Overrun / Underrun:	
<p>The marshy area shown on the plans was found to extend approximately 800 feet further than anticipated (Station 60+00 and 68+00). The construction of a 48" pipe in the area was revised to be bedded with crushed rock.</p> <p>The pavement at several locations was changed from 8" PCC to 9" PCC using contract items for each to accommodate heavy trucks.</p>	
Prepared by: Jack Frost, Project Manager	Date: 1/5/01
Approved by: (Construction Engineer) Controller will obtain proper approval	Date:
Signature: (Deputy Director for Engineering) – If over \$150,000	Date:

*Approval signatures not required for underruns.*

**RECORD OF CONTRACTOR PAYROLLS RECEIVED**

**STATE OF NEBRASKA  
DEPARTMENT OF ROADS**

Project No. I-80-0(100)

Contract Date March 27, 1996

Contractor Avid Construction Company, Inc.

Subcontractor \_\_\_\_\_

WEEK ENDING	DATE REC'D	REMARKS	WEEK ENDING	DATE REC'D	REMARKS
4-24-96	4-29-96		10-2-96	10-2-96	Payroll errors letter sent to contractor 10-7-96
* 5-1-96	5-6-96	Payroll errors letter sent to contractor 5-7-96	10-9-96	10-13-96	
5-8-96	5-19-96		10-2-96	10-14-96	Corrected Payroll
5-15-96	5-21-96		10-16-96	10-29-96	
* 5-1-96	5-24-96	Corrected Payroll	10-23-96	10-27-96	
5-22-96	5-27-96		10-30-96	11-3-96	
5-29-96	6-3-96		10-6-96	11-11-96	
6-5-96	6-10-96		11-13-96	11-19-96	Work suspended
6-12-96	6-18-96				
6-19-96	6-22-96				
6-26-96	6-30-96		4-16-96	4-20-97	
7-3-96	7-7-96		4-23-97	4-26-97	
7-10-96	7-15-96		4-30-97	5-3-97	
7-17-96	7-20-96		5-7-97	5-12-97	
7-24-96	7-29-96		5-14-97	5-18-97	
7-31-96	8-3-96		5-21-97	5-28-97	
8-7-96	8-11-96		5-28-97	5-31-97	
8-14-96	8-17-96		6-4-97	6-9-97	
8-21-96	8-24-96		6-11-97	6-18-97	Project completed
8-28-96	8-31-96				
9-4-96	9-8-96				
9-11-96	9-14-96				
9-18-96	9-24-96				
9-25-96	9-28-96				

Payrolls Complete 6-18-97  
(Date)

ORIGINAL: To Lincoln Office  
With Final Computations

\_\_\_\_\_  
Signature  
Project Manager  
Title  
Section 110, Exhibit #6

FD Form 84 Sep 70

# **SAFETY INSPECTION CHECKLIST** (Safety and Health Regulations for Construction)

This compliance inspection is intended to give a general view of possible violations a Federal Compliance Officer may find. It is not intended to be a comprehensive inspection. The State of Nebraska Department of Roads will be bound by any comments made by Department personnel that are contained herein, not by the failure of the Department personnel to point out a specific hazard or hazards. Statements contained herein are not to be construed as the Department of Roads approval or disapproval of the contractor's methods of complying with Federal Safety Regulations.

Project: I-80-0 (100)	Contractor: Avid Construction Company, Inc.
Project Manager: Arthur Jones	Date: June 31, 1996
Inspected By: Bill Smith	

		UNSATISFACTORY		NOT APPLICABLE				UNSATISFACTORY		NOT APPLICABLE			
SUBPART C - GENERAL SAFETY AND HEALTH PROVISIONS													
SUBPART D - OCCUPATIONAL HEALTH AND ENVIRONMENTAL CONTROLS													
1. Housekeeping (1926.25)	X					SUBPART I - TOOLS - HAND AND POWER							
SUBPART E - PERSONNEL PROTECTIVE AND LIFE SAVING EQUIPMENT													
1. Hard Hats (1926.100)	X					SUBPART J - WELDING AND CUTTING							
2. Hearing Protection (1926.101)	X					SUBPART K - ELECTRICAL							
3. Eye and Face Protection (1926.102)	X					SUBPART L - LADDERS AND SCAFFOLDING							
4. Respiratory Protection (1926.103)	X					SUBPART M - CRANES, DERRICKS, HOISTS, ELEVATORS, AND CONVEYORS							
5. Safety Belts and Lifelines (1926.104)	X					SUBPART N - CRANES, DERRICKS, HOISTS, ELEVATORS, AND CONVEYORS							
6. Safety Nets (1926.105)	X					SUBPART O - MOTOR VEHICLES, MECHANIZED EQUIPMENT, AND MARINE OPERATIONS							
7. Life Jackets and Skirt (1926.106)	X					SUBPART P - ESCAVATIONS, TRENCHING AND SHORING							
SUBPART F - FIRE PROTECTION AND PREVENTION													
1. Fire Protection Program (1926.150)	X					SUBPART Q - CONCRETE, CONCRETE FORMS AND SHORING							
2. "No Smoking Signs" in Hazardous Areas (1926.151)	X					SUBPART R - CONCRETE, CONCRETE FORMS AND SHORING							
3. Open yard storage of combustible material (1926.151)	X					SUBPART S - TUNNELS AND SHAFTS, CAISSONS, COFERDAM, AND COMPRESS AIR							
4. Approved containers and portable tanks (1926.152)	X					SUBPART T - TUNNELS AND SHAFTS, CAISSONS, COFERDAM, AND COMPRESS AIR							
5. Fire extinguishers (1926.152)	X					SUBPART U - BLASTING AND THE USE OF EXPLOSIVES							
6. Temporary Heating Devices (1926.154)	X					SUBPART V - BLASTING AND THE USE OF EXPLOSIVES							
SUBPART G - SIGNS, SIGNALS AND BARRICADES													
1. Traffic Signs Posted (1926.200)	X					SUBPART W - BLASTING AND THE USE OF EXPLOSIVES							
2. Inapplicable Signs covered or removed (1926.200)	X					SUBPART X - BLASTING AND THE USE OF EXPLOSIVES							
3. Flagmen Wearing Red Orange Garments (1926.201)	X					SUBPART Y - BLASTING AND THE USE OF EXPLOSIVES							
4. Barricades (1926.202)	X					SUBPART Z - BLASTING AND THE USE OF EXPLOSIVES							
SUBPART H - MATERIALS HANDLING, STORAGE, USE AND DISPOSAL													
1. Material stored and secured (1926.250)	X					SUBPART AA - BLASTING AND THE USE OF EXPLOSIVES							
2. Rigging equipment checked (1926.251)	X					SUBPART AB - BLASTING AND THE USE OF EXPLOSIVES							



OPTIONAL  
INSTRUCTION FOR USE OF SAFETY INSPECTION CHECKLIST

@

The Safety Inspection Checklist was developed from the Informational Guide on Occupational Safety on Highway Construction Projects published by A.A.S.H.O. Construction Safety and Health Regulations published in the Federal Register. Each item on this checklist is referenced by subsection number to the Informational Guide and it will be necessary for Project Managers and their designated representatives to be familiar with each specific subsection listed on the checklist, prior to making the inspection.

This inspection shall be performed by the Project Manager or the designated representative and shall be signed and dated by whomever, in fact, performs the inspection.

This inspection shall initially be required when substantial construction begins on a contract by the prime contractor or subcontractor on the contract at that time, until the work is completed, with the exception that monthly inspections will not be required when the work is suspended. In the case of the prime contractor, the safety checklist shall be made in triplicate with one copy becoming part of the project records. The original shall be given to the contractor's supervisor on the site, while the other copy shall be sent to the contractor's home office to the attention of the contractor's safety officer.

In the case of a subcontractor, the safety checklist shall be made in triplicate with one copy becoming part of the project records. The original shall be given to the subcontractor's supervisor on the site, while the other copy shall be given to the prime contractor's supervisor on the site.

If, in the opinion of the Project Manager or the designated representative, a possible violation of the OSHA regulations exists, he shall place a check in the satisfactory column for the specific area provided on the checklist.

In the case where the Project Manager or the designated representative has indicated an unsatisfactory condition on the safety checklist, he/she shall, at the time he/she presents the original to the contractor's supervisor on the site, explain to the contractor's supervisor the basis of his/her opinion that an unsatisfactory condition exists. In no case should the Project Manager or the designated representative advise the contractor on the method(s) to correct the unsatisfactory condition.

In cases where, in the opinion of the Project Manager or the designated representative, a situation which constitutes an imminent danger to life or limb exists, he/she shall request immediate abatement of the danger or if immediate abatement is not possible, removal of the employees from the danger area. In the event of contractor refusal to cooperate in eliminating an imminent danger situation, the Project Manager or the designated representative shall suspend work on the project and notify the nearest OSHA office immediately. In the case where the work is suspended the District Engineer, the Lincoln Construction Division and the contractor's home office should be notified immediately.

The Project Manager or the designated representative should not assume that the performance of these monthly inspections relieve him/her of his/her duty to notify the contractor of possible violations which may be discovered at any time during the course of the work. The Project Manager or the designated representative should notify the contractor's representative on the site, of any possible violation, at any time the Project Manager or the designated representative believes a possible violation exists.

# Flagger Certification Report

(Please print or type)

CARD NO.	DATE ISSUED	NAME	SOC. SEC. NO.	SCORE
①	10-1-96	Flaggers Name	(Flagger SSN)	②

I certify that the individuals listed above have met the requirements for Nebraska Department of Roads flagger certification as spelled out in the Standard Specifications, Supplemental Specifications, or Special Provisions and the Guidelines for Flagger Training and Certification of Flaggers.

① Number is on card when sent out  
by the Construction Division

..... (The Contractor's Instructor's Signature)

..... (Signature of Certifying Instructor)

② 80% is minimum passing score

3. Fax to 402-479-4854 to get the  
Flaggers put into the NDR  
computer file.

..... (Printed or Typed Name of Certifying Instructor)

..... (Date)


..... (Name of person & company)

..... (Contractor)

# Notification of Project Completion

PROJECT NO.: PEP-30-6(1031)		CONTROL NO.: 21623	
LOCATION: (City/Highway/Station limits)			
CONTRACTOR: Cyclone Construction Co.			
<b>PROJECT CATEGORY</b>			
<div style="margin-bottom: 10px;"> <input type="checkbox"/> FHWA Full Oversight (non-exempt Interstate over \$1,000,000) (NHS over \$1,000,000 let prior to 2-1-93)         </div> <div style="margin-bottom: 10px;"> <input type="checkbox"/> FHWA Certification Acceptance (National Highway System over \$1,000,00 let since 2-1-93)         </div> <div style="margin-bottom: 10px;"> <input checked="" type="checkbox"/> FHWA Exempt         </div> <div> <input type="checkbox"/> Other         </div>			
<p>Completion Date: 9-5-96</p> <div style="margin-bottom: 10px;"> <input checked="" type="checkbox"/> This completes all work on this project.         </div> <div style="margin-bottom: 10px;"> <input type="checkbox"/> Other contracts remain to be completed on this project. (List them)         </div> <div> <input type="checkbox"/> I certify that the construction of this project has been completed in accordance with the Certification Acceptance Agreement dated December 31, 1992. (see block 2 above)         </div> <div style="text-align: right; margin-top: 20px;"> <p>..... (Signature of Department of Roads official)</p> <p>..... (Title)</p> </div>			
<b>FOR FHWA USE ONLY</b>			
FHWA INSPECTION MADE BY:		DATE:	
IN COMPANY WITH:			
REMARKS:			
SIGNATURE:		DISTRIBUTION:	
TITLE:	DATE:	<input type="checkbox"/> FHWA (all FHWA projects) <input type="checkbox"/> Controller - Programming and Disbursements (all projects) <input type="checkbox"/> Construction (all projects)	

DR Form 91, Jul 93

 printed on recycled paper

(OPTIONAL - Not needed if information is in the Diary. Check with Project Manager)

## INSPECTORS WORKING DAY REPORT

CONTRACTOR: Cyclone Construction Co			GROUP: 76	MONTH: July 96
INSPECTOR:			PROJECT NO.: PEP-30-6(1031)	
DATE	WEATHER	HOURS WORKED	REMARKS: GIVE WORK IN PROGRESS EACH DAY AND STATIONS	
<b>SUN</b> 14	Sunny	0	No work	
<b>MON</b> 15	Rain	0	No work	
<b>TUE</b> 16	Sunny	4	Wet and muddy in AM. PM: Contractor placed poles from Station 210+1 to 250+10, on North side of Highway 30	
<b>WED</b> 17	Sunny	8	Contractor placed poles from station 210+1 to 250+10, on South side of Highway 30	
<b>THU</b> 18	Sunny	8	Contractor placed chainlink fence fabric from Station 210+1 to 250+10 on North and South sides of Highway 30	
<b>FRI</b> 19	Sunny	8	Contractor finish graded and seeded all disturbed areas Station 210+1 to 250+10. 6 ha = Total area seeded	
<b>SAT</b> 20	Sunny	0	No work	

DR Form 96, Sep 84

THIS FORM REPLACES DR FORM 96, OCT 70,  
PREVIOUS EDITIONS WILL BE USED UNTIL EXHAUSTED.

NEBRASKA DEPARTMENT OF ROADS  
WEEKLY PROGRESS / WORKING DAY REPORT

WEEK ENDING 09/27/97  
REPORT NO. 006

CONTRACT: 1290 CONTRACTOR: 0574 CONSTRUCTORS, INC.

GROUP NO. 8C

CONTROL NO.		PROJECT NUMBER		PROJECT LOCATION	
12290		STPP-STWD(33)		DISTRICT 1 - DISTRICTWIDE	

DAY OF WEEK	DATE	HRS WORKED	WORKING DAY	REMARKS
SUN	09/21/97	0	NO	
MON	09/22/97	0	NO	CCO-4" YELLOW EPOXY LINE PREVENTED BY RAIN MOST OF DAY.
TUE	09/23/97	0	NO	SAME
WED	09/24/97	0	NO	SAME
THR	09/25/97	5	YES	COMPLETED PAINTING YELLOW EPOXY LINE. WORK SUSPENDED. TILL '98, TAPE IN AUBURN.
FRI	09/26/97	0	NO	
SAT	09/27/97	0	NO	

** DATES **		** WORKING DAYS **		** PERCENT **	
ESTABLISHED BEGINNING	08/18/97	PREVIOUS	11		
ACTUAL START	08/20/97	THIS WEEK	1		
TENTATIVE ACCEPTANCE		TOTAL TO DATE	12	COMPLETE	81 %
REGULAR WORKING DAYS . . . .		ALLOWED	010	TIME ELAPSED	120 %
WORK STATUS: SUSP		DAYS BEHIND	3-	% BEHIND	19- %

PROJECT MANAGER: SCOTT, C. W.

SUBCONTRACTORS ON PROJECT THIS WEEK:  
2372 ALL IOWA CONTRACTING CO.

# REPORT OF LABOR COMPLIANCE INTERVIEWS

ORIGINAL — Construction Engineer  
COPIES — District Engineer & Project Manager

Project No. I-80-0(100)

Report No. 3

Contractor Avid Constr. Co., Inc.

Groups of Work 1, 4, 6 and 9

Sheet 1 of 1

Work Operations Checked Grading, Culverts and Bridge  
(Grading, Culverts, Bridges, etc.)

DATE INTERVIEWED	EMPLOYER (CONTRACTOR OR SUBCONTRACTOR)	EMPLOYEE	PAYROLL CLASSIFICATION	TYPE OF WORK BEING PERFORMED OR EQUIPMENT OPERATED	WAGE RATE	
					PAID	MINIMUM
6-26-96	Avid Constr. Co Inc	Carl Blue	Carpenter	Forming Bridge Deck	\$15.85	\$11.70
"	"	Tom Elder	Scraper Operator over 16 Cu. Yds	Scraper, over 16 Cu. Yds. Grading	\$15.15	\$11.30
"	"	Bill Arden	Laborer	Assisting Carpenters	\$13.75	\$ 8.50
6-27-96	"	Arnold Brott	Cement Finisher	Concrete Finishing on Box Culverts and Bridge	\$15.75	\$11.00
"	"	Bob Tolen	Bulldozer 115 D.B. Horsepower and over	Bulldozer, over 115 DB HP Grading	\$15.30	\$11.30

(Use Reverse Side for Remarks)

(Jerry R. Smith is the person interviewed)

Interviewer Larry Lee

Submitted by Arthur Jones  
(Project Manager) 6-27-96  
(Date)

Section 100, Exhibit #3

THIS FORM REPLACES DR FORM 98, JUL 74  
PREVIOUS EDITIONS WILL BE DESTROYED.

DR Form 98, Feb 88

**DISTRIBUTION**  
 White - Construction Engineer  
 Canary - Contractor  
 Pink - District Engineer  
 Goldenrod - Project Manager

# Work Order

<b>TO: (Contractor, Name and Address)</b>  Cyclone Construction Co. 12607 So. 70th St Papillion, NE 68133		<b>PROJECT NO.:</b> PEP-30-6(1031)																																																			
		<b>ORDER NO.:</b> #1																																																			
		<b>STATION:</b> 210+10.02																																																			
<p>You are hereby ordered to perform the extra work described below in compliance with Subsection 104.03 of the Specifications and the conditions listed herein. Reimbursement will be in accordance with the option marked below and the provisions of Subsection 109.05. Equipment rental rates, when applicable, will be established by applying prevailing Department policies and formulae to the rates established in the <b>Rental Rate Blue Book for Construction Equipment</b>.</p>																																																					
<b>Agreed Total Price or Unit Price</b> <input checked="" type="checkbox"/> Supplemental Agreement will be issued to incorporate agreed total price or unit price shown herein.		<b>Undefined Total Price</b> <input type="checkbox"/> Supplemental Agreement will be prepared following completion of the work to pay for labor, equipment, and material. Payment will be according to the provisions of Subsection 109.05. If the total cost is estimated to exceed \$50,000.00, then a Force Account Agreement should be considered.  <input type="checkbox"/> Force Account Agreement will be completed. Weekly force account statements will be prepared.																																																			
<b>DESCRIPTION OF WORK: (Include specifications if non-standard items)</b>  Vehicle access gate added at the request of Sarpy County Engineer Gate is 3.m wide 1.2m. high with chain and lock. Standard chain link fence fabric.																																																					
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">ITEM OF WORK</th> <th style="width: 10%;">UNIT</th> <th style="width: 10%;">APPROX. QUANTITY</th> <th style="width: 15%;">AGREED UNIT PRICE</th> <th style="width: 15%;">AMOUNT</th> </tr> </thead> <tbody> <tr> <td>Chainlink fence</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Vehicle access gate</td> <td>ea</td> <td>1</td> <td>\$510.00</td> <td>\$510.00</td> </tr> <tr><td> </td><td></td><td></td><td></td><td></td></tr> <tr><td> </td><td></td><td></td><td></td><td></td></tr> <tr><td> </td><td></td><td></td><td></td><td></td></tr> <tr><td> </td><td></td><td></td><td></td><td></td></tr> <tr><td> </td><td></td><td></td><td></td><td></td></tr> <tr><td> </td><td></td><td></td><td></td><td></td></tr> <tr> <td colspan="3"></td> <td style="text-align: right;"><b>TOTAL PRICE</b></td> <td style="text-align: right;"><b>\$ \$510.00</b></td> </tr> </tbody> </table>				ITEM OF WORK	UNIT	APPROX. QUANTITY	AGREED UNIT PRICE	AMOUNT	Chainlink fence					Vehicle access gate	ea	1	\$510.00	\$510.00																																		<b>TOTAL PRICE</b>	<b>\$ \$510.00</b>
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DR Form 188, Jul 94

THIS FORM REPLACES DR FORM 188, AUG 78.  
 PREVIOUS EDITIONS WILL BE DESTROYED.

@

This information must be given to the project manager prior to beginning work, preferably at the preconstruction conference.

## DBE PERFORMANCE RECORD

Submitted by John Jones of Small Construction Co.

Project Number E-6-7 (1030) Location \_\_\_\_\_

Prime Contractor Cyclone Construction Co Amount of Subcontract \$50,000.00

Description of work to be performed. Identify by group or line item and type of work.

Group 7B - 1000 m of 1.83 m high chain link fencing to be

List of owned equipment to be used on this project.

300 mm post hole auger

Mobile cement mixer

List of leased equipment to be used on this project. Attach a copy of the lease.

Grader

Name of superintendent assigned to this project John Jones of Small Construction Co

Names of foremen assigned to this project Paul Jones

If local labor is to be used, who is responsible for hiring Paul Jones

Who is responsible for ordering materials John Jones

Who is authorized to accept deliveries John or Paul Jones

List of materials and supplies needed for this project and source of supply

300 poles at 37.5 mm diam x 2.1 m length Menards Lumber, Paillion

1000 m of chainlink fence fabric " " "

Cement 300 Sacks " " "

Do you have an agreement for the issuance of joint checks for supplies? Yes X No \_\_\_\_\_

List workers to be used on this project. If worker is a regular employee, show their name. If not yet hired, indicate if to be local hire. Use another sheet if necessary.

Trade	Name	Local Hire
<u>Carpenter</u>	<u>James Green</u>	<u>Yes</u>
<u>Carpenter</u>	<u>Sheila Smith</u>	<u>Yes</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____





# Special Training Provision Monthly On-Job-Training Report

Sheet 1 of 1

CONTRACTOR: (Name and Address) Cyclone Construction Co. 12699 So 70th St Papillion, NE						<b>INSTRUCTIONS:</b> This summary report must be made each month in triplicate. Original and one copy to Project Manager in sufficient time for inclusion in monthly progress estimate. Keep copy for file. <b>NOTE:</b> Remarks column to be used for reporting when a trainee completes training, terminates employment or is replaced by another trainee.					
PROJECT NO.:						MONTH AND YEAR:					
<b>LEGEND</b>						B - Black      A - Asian American Pacific Islander      W - Women AI - American Indian/Alaska Native      H - Hispanic					
TRAINEE NAME AND SOCIAL SECURITY NUMBER <i>(one Trainee per line)</i>	RACE OR NATIONAL ORIGIN	WORK CLASSIFICATION	GROUP BEING TRAINED	WAGE RATE PAID	HOURS TRAINED THIS MONTH		TOTAL HOURS TRAINED TO DATE		REMARKS		
John J. Kneu	B	Carpenter		8.50	35	25	150	250	None		
Jose L. Knesto	H	Carpenter		8.50	25	35	50	200	None		
		(PM submit to the Construction Division, Minority Business Office.)									
CONTRACTOR'S REPRESENTATIVE: (Signature & Title)				DATE:		REVIEWED FOR DEPARTMENT OF ROADS: (Signature & Title)				DATE:	
						(PM)					

DR Form 298, Jan 94

THIS FORM REPLACES DR FORM 298, FEB 74.  
PREVIOUS EDITIONS WILL BE DESTROYED

(On Computer)  
**Evaluation of Contractor**

Contractor: Jones Construction Company

Number

Project No. 00910021 Coding for Project RF-91(21)

<b>1</b>	<div style="display: flex; justify-content: space-between;"><div><p>1 <input checked="" type="checkbox"/> Prime Contractor</p><p>2 <input type="checkbox"/> Subcontractor for: _____ <small>(Name of Prime Contractor)</small></p><p>Location <u>O m a h a - F t . C a l h o u n</u></p><p>County <u>W a s h i n g t o n</u></p></div><div style="text-align: right;"><p>Project = Blank Patrol = 1 Bridge = 2 Other = 3</p><p>Add = Blank Change = C Delete = D</p></div></div>																																																																																																														
<b>2</b>	<p>District No. <u>2</u></p> <p>Groups of Work <u>1 a n d 3</u></p> <p>Amount of Contract or Subcontract \$ <u>7,436,025.8</u></p>																																																																																																														
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<p><b>Note:</b> If you wish to make any remarks concerning the above data or ratings, place a checkmark here and enter remarks on reverse side of this form. <input type="checkbox"/></p>																																																																																																															
<p><b>Instructions:</b></p> <p>Complete required information for all contractors and subcontractors for each contract. Submit with final computations.</p>	<div style="display: flex; justify-content: space-between;"><div><p>Report Date</p><table border="1" style="display: inline-table; text-align: center;"><tr><td>MONTH</td><td>DAY</td><td>YEAR</td></tr><tr><td>1</td><td>3</td><td>79</td></tr></table></div><div><p>Project Manager</p><table border="1" style="display: inline-table; text-align: center;"><tr><td>LAST NAME</td><td>INITIALS</td></tr><tr><td>S m i t h</td><td>A T</td></tr></table></div></div> <p>Signed: <u>A T Smith</u></p> <p style="text-align: right; font-size: small;">Project Manager</p>	MONTH	DAY	YEAR	1	3	79	LAST NAME	INITIALS	S m i t h	A T																																																																																																				
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# E.E.O. CONTRACTOR'S SELF-ANALYSIS

MONTH AND YEAR:  
January 1996

## INSTRUCTIONS

This self-analysis form is designed for contractors to indicate their affirmative action practices and for equal employment opportunity procedures. It is required of all prime contractors and subcontractors on Federal-aid projects of \$10,000 or more and is valid for one year. Self-analysis forms should be submitted at the beginning of each year. **You cannot begin work on any federal aid project for that current year until your affirmative action practices and equal employment opportunity procedures have been accepted.** The prime contractor must assure that their subcontractors have filed their self-analysis form prior to the start of the project. This self-analysis will cover any affiliated companies if names and addresses are furnished. Additional forms are available upon request from the Department of Roads' Minority Business Office in Lincoln or any district office.

### NAME AND ADDRESS OF CONTRACTOR:

Cyclone Construction, Inc., PO Box 1000  
Liberal, KS 67901-2000

## GENERAL

- |  |   |
|--|---|
| <b>1</b> Is our company aware of the equal employment opportunity requirements?<br><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | <b>2</b> Our key company personnel are aware of equal employment opportunity requirements as set forth in Form FHWA 1273, "Required Contract Provisions Federal-Aid Construction Contracts" and the Special Provisions. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |
|--|---|

## EQUAL EMPLOYMENT OPPORTUNITY POLICY

It is the policy of this company to assure that applicants are employed, and that employees are treated during employment, without regard to their race, religion, sex, color, or national origin. Such action shall include: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship, preapprenticeship, and/or on-the-job training.

☐ YES ☐ NO

Is this E.E.O. policy posted at all Federal-aid project sites?  
☒ YES ☐ NO (Indicate where posted)

On a bulletin board located at the job site.

Are the required E.E.O. posters posted near the E.E.O. policy?  
☒ YES ☐ NO

Are all employee facilities on a nonsegregated basis?  
☒ YES ☐ NO

### E.E.O. OFFICER: (Name and address)

Ken Michael  
124 Kansas Ave.  
Liberal, KS 67901

### AFFILIATED COMPANY(S)

Smith Construction Co. PO Box 668 Lincoln, NE 68123	John Construction Co. 5601 So 48 St. Omaha, NE 68444
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Has the E.E.O. officer adequate knowledge, authority and responsibility to carry out the E.E.O. provisions of the contract? ☐ YES ☐ NO (Summarize the duties, authority and responsibilities of the company E.E.O. officer)

Complete authority, familiar with all requirements, checked minority groups

## DISSEMINATION OF POLICY

- 1** All members of our staff who are authorized to hire, supervise, promote and discharge employees, or recommend such action, are made fully cognizant of E.E.O. policy in the following manner:

Superintendents are required to take "orientation" which is a training session that includes provisions of our EEO policy. Also, we hold year end meetings annually to review and revise policies.

- 2** Our E.E.O. officer will hold a meeting with all supervisory and personnel office employees, prior to the start of work on Federal-aid projects, to explain our E.E.O. policy and how affirmative action can be carried out? ☒ YES ☐ NO (Summarize dates and locations of such meetings)

Office employees go over each contract prior to the start of a job to check and verify EEO requirements. "Tailgate" meetings are held at the jobsite whenever and wherever employees can be assembled prior to the start of a Federal Aid project.

- 3** Our E.E.O. officer has established the following schedule to conduct meetings with supervisory employees relative to E.E.O. provisions. (Meetings must be conducted at least every six months)

Weekly safety meetings are held in which all EEO changes or problem areas can be discussed. Also, one large meeting is held at the start of each year; smaller meetings are held at the start of each Federal Aid project.

<b>4</b>	Are all new supervisory personnel given a thorough indoctrination by our E.E.O. officer, or other knowledgeable company official, within thirty days after reporting to work? <input checked="" type="checkbox"/> <b>YES</b> <input type="checkbox"/> <b>NO</b> How is this accomplished? In addition to "orientation", the EEO officer gives new personnel an EEO Policy Statement to read and sign before they start work. Office personnel verify that the forms are promptly submitted and signed. The EEO Officer is available to all employees to answer questions they may have.
<b>5</b>	Are all applicants and new employees informed of our company's E.E.O. policy when they report for an interview or work? <input type="checkbox"/> <b>YES</b> <input type="checkbox"/> <b>NO</b> How is this accomplished? Complete EEO Policies are located on bulletin boards at the shop where applicants apply. New-hire employees are given the same EEO Policy Statement to read and sign as are Supervisory personnel.
<b>RECRUITMENT</b>	
<b>1</b>	When advertising for employees, our advertisements carry the notation "An Equal Opportunity Employer." <input type="checkbox"/> <b>YES</b> <input type="checkbox"/> <b>NO</b> <i>(Attach a copy of advertising previously used)</i>
<b>2</b>	Are advertisements for employees carried in newspapers and other publications which have a large circulation among female and minority groups? <input checked="" type="checkbox"/> <b>YES</b> <input type="checkbox"/> <b>NO</b> <i>(Specify papers or publications)</i> In addition to newspapers, we send recruitment letters to the following organizations: Job Service Centers in Hays, Colby, Junction City, McPherson, Salina, Dodge City, Garden City, Goodland, Liberal, Tabor College, Fort Hays, Bethany College, KS Wesleyan, Salvation Army, American G.I. Forum, YMCA, YWCA, and St. Mary's of the Plains.
<b>3</b>	Are supervisory employees instructed to keep a record of all personnel who apply for employment at the job site? <input checked="" type="checkbox"/> <b>YES</b> <input type="checkbox"/> <b>NO</b> How is a record kept as to whether applicant is a minority or female and the details as to why applicant is or is not hired? Information is submitted to the office where an applicant roster is entered on the computer.
<b>4</b>	Does our company maintain a list of minority and female recruitment sources, provide written notification to minority and female recruitment sources and community organizations when we have employment opportunities available, and maintain a record of the organization responses? <input checked="" type="checkbox"/> <b>YES</b> <input type="checkbox"/> <b>NO</b> <i>(Give dates and locations of such recruitment)</i> We mailed letters to minority agencies soliciting help for several projects in Nebraska and Iowa. Their letters are on file and listing of minority agencies is also on file for future use.
<b>5</b>	Our company is: <input type="checkbox"/> Union <input checked="" type="checkbox"/> Non-union
<b>6</b>	We rely <input type="checkbox"/> solely on or <input type="checkbox"/> partly upon unions as a source of our work force. n/a
<b>7</b>	How many minority and female employees have the union referred for hiring? 0
<b>8</b>	Has our company made an effort to incorporate an E.E.O. clause in all union agreements to the end that such unions will be contractually bound to refer applicants without regard to race, religion, sex, color or national origin? <input type="checkbox"/> <b>YES</b> <input type="checkbox"/> <b>NO</b> <i>(Specify)</i> We currently do not have any union agreements. However, all EEO requirements are made an integral part of each contract/subcontract agreement.
<b>9</b>	Are present employees encouraged to refer minorities and females for employment? <input checked="" type="checkbox"/> <b>YES</b> <input type="checkbox"/> <b>NO</b> <i>(Specify)</i> Letters to employees are posted in our shop encouraging referrals of minorities, women, and veterans of the Vietnam Era.
<b>PERSONNEL ACTIONS</b>	
<b>1</b>	Are all wages, working conditions, and employee benefits established and administered, and personnel actions of every type, including hiring, upgrading, promotion, transfer, demotion, layoff, and termination taken without regard to race, color, religion, sex, or national origin? <input checked="" type="checkbox"/> <b>YES</b> <input type="checkbox"/> <b>NO</b> <i>(Specify)</i> See EEO Policy.
<b>2</b>	How often are project site inspections made to insure nondiscrimination in working conditions and employee facilities? Who makes these inspections? Monthly inspections are made by the EEO Officer.

<b>3</b>	How are all employees instructed as to whom they can contact if they believe discrimination is occurring? The name, address and phone number of the EEO Officer is listed on the EEO Policy Statement which every employee signs. It is posted at the shop and on the bulletin boards at the job site. It is listed in the Employee Handbook which not only names the EEO officer but outlines steps to take if there is a grievance.
<b>4</b>	How are investigations made of all complaints, and how is a record made of the appropriate action? See the section on grievances in the employee handbook. The date, the names of parties involved, the complaint and the action taken will be logged. When a mutual understanding is reached, the log will be considered closed.
<b>5</b>	How is a periodic review made of the spread of wages in each classification to determine any evidence of discriminating wage practices? Twice a year all wages are reviewed by classification of employee and are updated accordingly. We have a set wage scale for each class of employee, regardless of age, race, sex, etc.
<b>6</b>	How are our employees informed of any training programs available and the entrance requirements of each? There is a memo posted on the bulletin board at the shop regarding the Manpower Training Program. Also, employees are informed of training programs on a pre-employment form, and given an opportunity to enroll upon employment. Letters are sent out to each employee prior to new session of "Our University", our in-house training program.
<b>7</b>	What provisions have been made for upgrading employees through on-the-job training? Employees are eligible to participate in "Our University" training sessions free of charge during the lay-off season.
<b>SUBCONTRACTING</b>	
<b>1</b>	How are subcontractors informed as to E.E.O. requirements of the company? EEO requirements are included in each subcontract agreement. See attached.
<b>2</b>	What steps have been taken to assure our company that all subcontractors are complying? The EEO officer visits each job site at least once a month to ensure that subcontractors are in compliance. Also, a Project Superintendent is available on a daily basis to ensure that requirements are being met.
<b>3</b>	Does our company try to utilize minority group subcontractors or subcontractors with meaningful minority group representatives among their employees? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (Specify) Minority contractors are used as subcontractors whenever possible. Please note: Brown & Brown, Inc. works primarily as a subcontractor rather than a prime contractor.
<b>RECORDS AND REPORTS</b>	
<b>How are records kept for the following items:</b>	
<b>1</b>	The number of minorities and females employed in each work classification on the project. Labor reports are completed as required. See attached. Periodic reports are prepared by the office and forwarded to the EEO Officer with recommendations on hiring.

<b>2</b>	<p>The progress and efforts being made in cooperation with unions to increase employment opportunities for minorities and females.</p> <p>We do not have previous experience with unions.</p> <p style="text-align: center;">or</p> <p>We are Non-Union.</p>
<b>3</b>	<p>The progress and efforts being made in locating, hiring, training, qualifying, and upgrading minority and female employees.</p> <p>All applications are considered, applications are on file if any job openings are available.</p> <p>We are trying to recruit minority and female employees.</p>
<b>4</b>	<p>The progress and efforts being made in securing the services of minority group subcontractors or subcontractors with meaningful minority group and female representation among their employees.</p> <p>Quotations requested for State and Federal projects.</p>
<b>5</b>	<p>Are all records retained for a period of three years and available for review by the Nebraska Department of Roads or the Federal Highway Administration? <input checked="" type="checkbox"/> <b>YES</b> <input type="checkbox"/> <b>NO</b> <i>(Indicate at what location these records are available for review)</i></p> <p>Cyclone Cosntruction, Inc., 124 Kansas Avenue, Liberal, KS 67901</p>
<b>6</b>	<p>What procedure is followed to assure all E.E.O. forms required by the Nebraska Department of Roads and the Federal Highway Administration have been submitted as required?</p> <p>The contractual agreement is read carefully with particular attention to EEO requirements.</p> <p>We complete many EEO steps regardless of whether or not they are required by a particular state to ensure that our EEO obligations are fulfilled.</p>

Page 4 of 4

**UPON COMPLETION SEND TO:**

**Nebraska Department of Roads**  
 Minority Business Office  
 PO BOX 94759  
 LINCOLN NE 68509-4759

**CONTRACTOR PREPARES AND SUBMITS THIS FORM**

**RETURN TO:**

Nebraska Department of Roads  
Contract Lettings Division  
P. O. Box 94759  
Lincoln, NE 68509-4759

Date: 9-16-96

**NEBRASKA DEPARTMENT OF ROADS  
IDENTIFICATION OF DBE GOAL ACHIEVEMENT  
DBE I**

Project No.: F-16-3(222) Location: Nebraska City-South ST.

Letting Date: 2-22-96

\$275,905.99

Total dollar goal commitment at time of contract award: \$\_\_\_\_\_

Contractor's Name and Address: Ford & Ford Construction Company, Inc.

2134 Denver Avenue

Seward, Nebraska 21689

	Name of Certified DBE	Description of Work Subcontracted or Services Provided	\$ Amount of Subcontract	\$ Amount of Payment Issued	\$ Amount of Retainage
1.	<u>Orlando Construction Co., Inc.</u>	<u>Group 7</u>	<u>82,443.00</u>	<u>81,443.00</u>	<u>1,000.00</u>
	<u>Gemini Construction Co.</u>	<u>Group 4A</u>	<u>193,462.99</u>	<u>191,528.36</u>	<u>1,934.63</u>
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____
6.	_____	_____	_____	_____	_____
7.	_____	_____	_____	_____	_____
8.	_____	_____	_____	_____	_____
9.	_____	_____	_____	_____	_____

By \_\_\_\_\_  
Signature

Total Actual DBE \$ 275,905.99



**SUBCONTRACTOR PREPARES AND SUBMITS THIS FORM**

**RETURN TO:**

Nebraska Department of Roads  
Construction Division - Business Minority  
P.O. Box 94759  
Lincoln, NE 68509-4759

Date: 9-16-96

Nebraska Department of Roads

## Identification of Work Performed

### DBE II

Project No.: F-16-3(222) Location: Nebraska City-South St.

Letting Date: 2-22-96

DBE Subcontractor's Name and Address: Orlando Construction Co., Inc.

PO Box 1061

Geneva, Nebraska 69205

Name of Prime Contractor: Ford & Ford Construction Company, Inc.

	Description of Work Subcontracted or Services Provided	\$ Amount of Subcontract	\$ Amount of Payment Received	\$ Amount of Retainage
1.	Items Group 7	82,443.00	81,443.00	1,000.00
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				

By \_\_\_\_\_ *Signature* Total Actual  
Payment Received \$ 81,443.00